



# Refusal of Transport in a Canadian EMS System

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## BACKGROUND

Patient refusal of treatment and/or transportation to hospital post emergency medical services (EMS) response may pose a safety risk to patients and a legal risk to EMS operators. We sought to investigate the characteristics and outcomes of those patients who activated the EMS system and subsequently refused transport by EMS.

## STUDY DESIGN

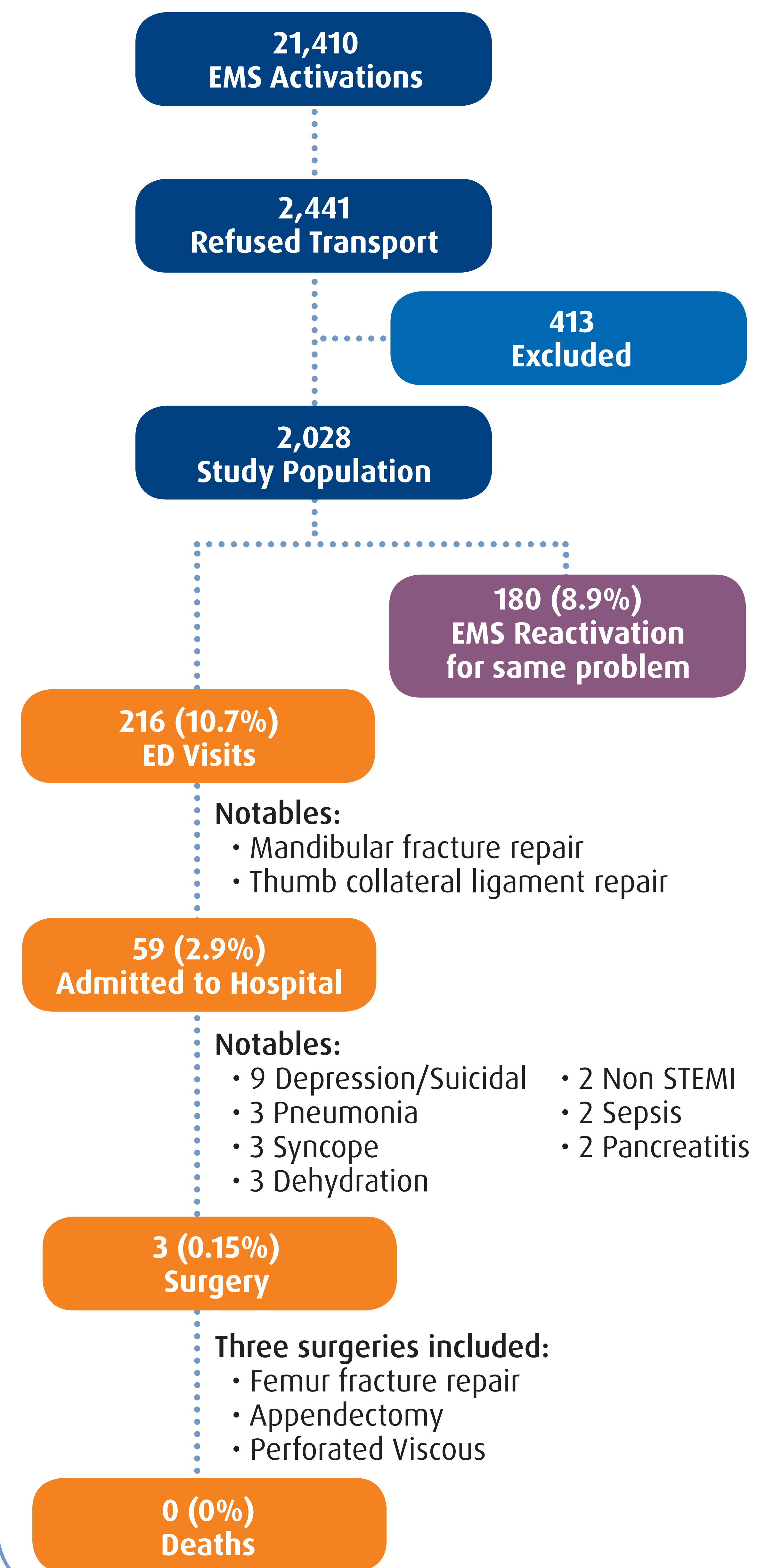
Retrospective analysis of electronic patient care reports (ePCR) in which EMS was activated and transportation to hospital was refused by the patient. Exclusion criteria included calls specifically for lift assists and records with incomplete data.

## METHODS

The ePCRs meeting the research criteria between April 1, 2012 and March 31, 2013 were reviewed. Prehospital data was reviewed to determine demographics of patients that were refusing transport. Prehospital and hospital records were reviewed to determine seven day outcomes of patients who refused transport.

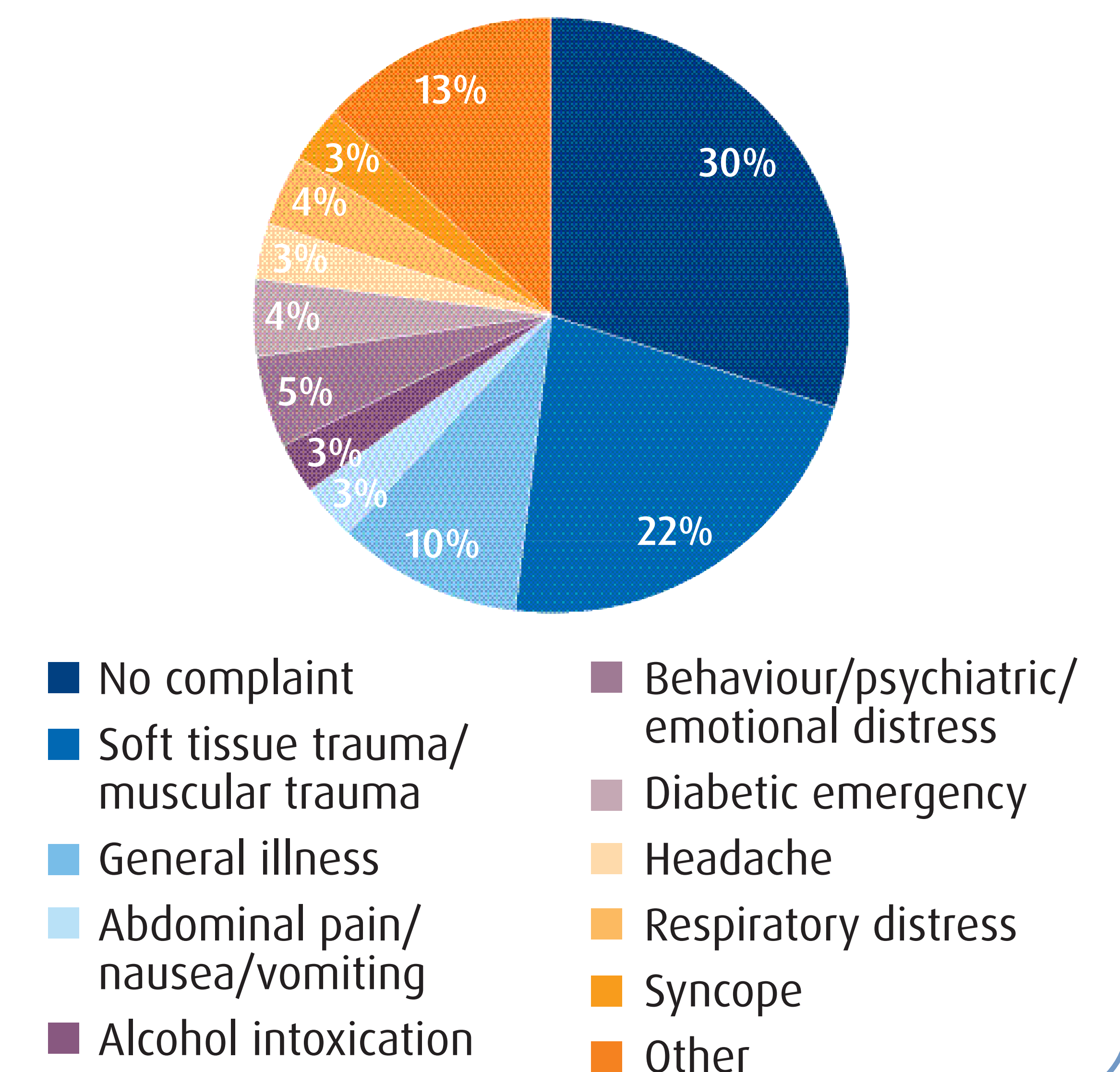
## REFUSAL OF TRANSPORT

Patient outcomes with seven days of refusal.



## RESULTS SECTION

Primary problem that resulted in refusal of transport.



## CONCLUSION

Refusal of transportation is not uncommon in our EMS system. Hospital admission, surgical treatment and death are rare in this subset of patients. Further studies in other EMS jurisdictions are required to better understand the impact of patient refusal of transport on post refusal outcomes.

## LIMITATIONS

- Patient follow up was limited to seven days post refusal of transport.
- Follow up data was limited to a single hospital site.